

0020

Incoming
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UNITED STATES POSTAL SERVICE
AND DIST SVC 04/13/2006

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

VICKIE SOUTHWICK
DIVISION OF OIL GAS AND MINING
1594 WEST NORTH TEMPLE SUITE 1210
SLAT LAKE CITY UTAH 84114

RECEIVED
APR 13 2006

LETTER DATED 4/4/2006
NOC 99-1-1
C/007/010
ANALEX INC RESOURCES
CENTENNIAL MINE

DIV. OF OIL, GAS & MINING

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
|--|---|
| <p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p>MIKE GLASSON ANALEX RESOURCE P O BOX 902 PRICE UTAH 84501</p> <p>2. Article Number (Transfer from service label)</p> | <p>A. Signature <i>Michael Glasson</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Michael Glasson</i></p> <p>C. Date of Delivery <i>4-8-06</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. </p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p> |
| <p>7004 2510 0004 1824 7548</p> | |
| <p>PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1540</p> | |